



Atty Dkt No. 8850-0002.06  
PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Application of:

Adam HELLER et al.

Confirmation No.: 6348

Serial No.: 10/629,348

Group Art Unit: 3737

Filing Date: July 28, 2003

Examiner: Unassigned

Title: INTEGRATED LANSING AND MEASUREMENT DEVICE AND ANALYTE MEASURING METHODS

**RESPONSE TO NOTICE TO FILE MISSING PARTS**

**Mail Stop Missing Parts**  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

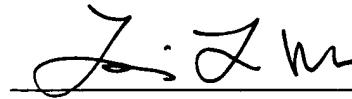
In response to the Notice to File Missing Parts dated October 24, 2003, transmitted herewith for filing are the following documents:

1. a copy of the Notice to File Missing Parts;
2. a Combined Declaration and Power of Attorney signed by the inventors;
3. a Blanket Petition for Extension of Time and Authorization to Charge or Credit Deposit Account; and
4. a check in the amount of \$900 to cover the required fees (surcharge, \$130; statutory basic filing fee, \$770).

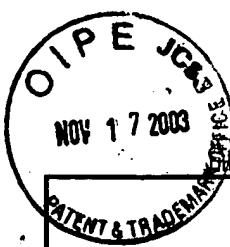
The Commissioner is hereby authorized to charge any additional fees under 37 CFR §§ 1.16, 1.17 and 1.21 which may be required by this paper, or to credit any overpayment, to Deposit Account No. 18-0580.

Respectfully submitted,

By:

  
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Louis L. Wu  
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Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

<b>TRANSMITTAL FORM</b> <i>(to be used for all correspondence after initial filing)</i>		Application Number <b>10/629,348</b>
Mail Stop	Missing Parts	Filing Date <b>July 28, 2003</b>
		First Named Inventor <b>Adam HELLER</b>
		Art Unit <b>3737</b>
		Examiner Name <b>Unassigned</b>
		Attorney Docket Number <b>8850-0002.06</b>

**ENCLOSURES (Check all that apply)**

<input type="checkbox"/> No fee due <input type="checkbox"/> Fee Transmittal <input checked="" type="checkbox"/> Fee(s) due <input checked="" type="checkbox"/> Fee Transmittal <input checked="" type="checkbox"/> Check for \$900.00 <input checked="" type="checkbox"/> Charge any underpayment or credit any overpayment to Deposit Account No. 18-0580 <input checked="" type="checkbox"/> Return postcard <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement & Form(s) PTO-1449 <input type="checkbox"/> Copy(ies) of cited reference(s) <input type="checkbox"/> Certified Copy of Priority Document(s) <input checked="" type="checkbox"/> Response to Missing Parts / Incomplete Application <input checked="" type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s):	<input type="checkbox"/> After Allowance Communication to a Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <b><u>Copy of the Notice to File Missing Parts; Combined Declaration and Power of Attorney; and Blanket Petition.</u></b>
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## Remarks:

**The Commissioner is hereby authorized to charge any additional or underpayment of fee(s) to Deposit Account No. 18-0580.****SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm or Individual Name (print/type)	<b>Louis L. Wu, Reg. No. 44,413</b> <b>Reed &amp; Eberle LLP</b>		Telephone <b>(650) 330-0900</b>
Signature			Date <b>November 13, 2003</b>

**CERTIFICATE OF TRANSMISSION/MAILING**

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Name (print/type)	<b>Margaret K. Surridge</b>		
Signature		Date	<b>November 13, 2003</b>